er the Paperwork Reduction Act of 1995, no persons are req	uired to res			Office: U.S. DEPARTMENT OF COM unless it displays a valid OMB control r				
UTILITY	Attorney	Docket No.						
PATENT APPLICATION	First Inv	ventor	Ron L. HALE					
TRANSMITTAL	Title		МЕТН	OD FOR TREATING PAIN				
ly for new nonprovisional applications under 37 CFR 1.53(b))	Express	Mail Label		ER 317 679 510 US	9			
APPLICATION ELEMENTS see MPEP chapter 600 concerning utility patent application of	ontents.	,	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria VA 22313-1450	J.S. P			
Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing Applicant claims small entity status. See 37 CFR 1.27. Specification (Total Pages (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D	29]		Computer Progotide and/or Amilicable, all necessar Compute Specification S	er Readable Form (CRF) equence Listing on: ROM or CD-R (2 copies); or	31281			

4.	Newly executed (original or co Copy from a prior application ((for continuation/divisional with Box i. DELETION OF INVEN Signed statement attached named in the prior applicat 1.63(d)(2) and 1.33(b). pplication Data Sheet. See 37 CFR 1	R & D e, ix ed) ets 2 ges 3 ppy) (37 CFR 1.63(d)) (18 completed) TOR(S) d deleting inventor(s) tion, see 37 CFR	9.	ii. Paper Statements COMPANYING Assignment Paper 37 CFR 3.73(b) St. (when there is an ass English Translation Information Disclos Statement (IDS)/P Preliminary Amend Return Receipt Po (Should be specificall Certified Copy of F (if foreign priority is cl Nonpublication Re (b)(2)(B)(i). Applic or its equivalent. Other:	oM or Control of the	cD-R (2 copies); or Ing identity of above copies CLICATION PARTS Let sheet & document(s)) The Power of Attorney ment (if applicable) Copies of IDS Citations (MPEP 503) ed) Document(s) Lunder 35 U.S.C. 122 ust attach form PTO/SB/35
specification fo Co Prior a For CONTINU under Box 5b	DNTINUING APPLICATION, check application Data Sentinuation Divisional Compileration Information: Examiner Library is considered a part of the disclosure incorporation can only be relied upon	continuation-in-part (.76: (CIP) of p of the prior	rior application No.: Group / Art U application, from wi	:	oath or declaration is supplied
		CORRESPON				
X	Customer Number:	37485		or 🗀	Corre	espondence address below
Name	Elaine C. Stracker J.D., Ph.D.					
	V.P. Intellectual Property	· · · · · · · · · · · · · · · · · · ·	-			
Address	Alexza Molecular Delivery Corporat 1001 E. Meadow Circle	1011				
City	Palo Alto	State (CA.	Zip C	ode	94303
Country	USA		550.687.3905	- 	Fax	650.687.3999
	(Print/Type) Elaine C. Stracker J.D., Phi	.D	Regi	stration No. (Attorney)	/Agent) Date	43,166 11/20/2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEE TRANSI	ΛΙΤΤΔΙ	Complete if Known					
		Application Number	Not Yet Assigned				
for FY 2003		Filing Date	November 20, 2003				
Effective 01/01/2003. Patent fees are sub	ject to annual revision.	First Named Inventor	Ron L. HALE				
Applicant claims small entity status.	See 37 CFR 1.27	Examiner Name	Not Yet Known				
		Art Unit	Not Yet Known				
TOTAL AMOUNT OF PAYMENT	(\$) \$464.00	Attorney Docket No.	0063.01R				
METHOD OF PAYMENT (ch	HOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)						

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Money Other None		3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account:	Fee	Fee	Fee	Fee	Fee Description Fee Paid				
Deposit Account 502731	Code 1051	(\$) 130	2051	(\$) 65	Surcharge - late filing fee or oath				
Number Deposit	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet				
Account Name Alexza Molecular Delivery Corp.	1053	130	1053	130	<u></u>				
The Director Is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a request for ex parte reexamination				
Charge fee(s) indicated below Credit any overpayments	1804	920 *	1804	920*	Requesting publication of SIR prior to Examiner action				
Charge any additonal fee(s) during the pendency of this application	1805	1,840*	1805	1,840*					
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1251	110	2251	55	Extension for reply within first month				
FEE CALCULATION	1252	410	2252	205	Extension for reply within second month				
1. BASIC FILING FEE	1253	930	2253	465	Extension for reply within third month				
Large Entity Small Entity	1254	1,450	2254	725	Extension for reply within fourth month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	1255	1,970	2255	985	Extension for reply within fifth month				
1001 750 2001 375 Utility filing fee 385.00	1401	320	2401	160	Notice of Appeal				
1002 330 2002 165 Design filing	1402	320	2402	160	Filing a brief in support of an appeal				
1003 520 2003 260 Plant filing fee	1403	280	2403	140	Request for oral hearing				
1004 750 2004 375 Reissue filing	1451	1,510	1451	1,510	Petition to institute a public use proceeding				
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive - unavoidable				
SUBTOTAL (1) (\$) \$385.00	1453	1,300	2453	650	Petition to revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND	1501	1,300	2501	650	Utility issue fee (or reissue)				
Fee from		470	2502	235	Design issue fee				
Extra Claims below Fee Paid Total Claims 24 -20** = 4 X 9.00 = 36.00	1503	630	2503	315	Plant issue fee				
Total Claims 24 -20** = 4 X 9.00 = 36.00 Independent 4 - 3** = 1 X 43.00 = 43.00	1460	130	1460	130	Petitions to the Commissioner				
Claims 45.00 45.00 Multiple Dependent =	1807	50	1807	50	Processing fee under 37 CFR § 1.17(q)				
Large Entity Small Entity	1806	180	1806	180	Submission of Information Disclosure Statement				
Fee Fee Fee Fee Description Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20	1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))				
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be examined				
1204 84 2204 42 ** Reissue independent claims	1801	750	2801	375	(37 CFR § 1.129(b)) Request for Continued Examination (RCE)				
over original patent	1802	900	1802	900					
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		' of a design application { Other fee (specify)							
SUBTOTAL (2) (\$) \$79.00]								
(\$) \$17.00		. ••		-	Fee Paid SUBTOTAL (3)				
**or number previously paid, if greater, For Reissues, see above	*Red	auced b	y Basic	Filing	Fee Paid SUBTOTAL (3) (\$)				
SUBMITTED BY			Complete (if applicable)						
Name (Print/Type) Elaine C. Stracker J.D., Ph.D.		Registra (Attome)		0.	43,166 Telephone (650) 687-3905				

Signature November 20, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Complete if Known

Not Yet Assigned

November 20, 2003

PTO/SB/17 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

Filing Date

FEE TRANSMITTAL

for FY 2003

	n rece are outly		···	1 1131	Maille	G 111VC	1101	KUI L.	HALL				
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name Not You				Not Ye	Yet Known					
			\a				Not Ye	Yet Known					
TOTAL AMOUNT OF PAYMENT (\$) \$40			0.00	.00 Attorney Docket No. 006					3.01R				
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)									
Check Credit card	Money Or	ther None	3. Al	DDITIC	NAL	FEES		- ' '					
Deposit Account:	Order L		Large Fee	Entity Fee	Small Fee	Entity Fee	-	_	.				
Deposit	500521		Code	(\$)	Code	(\$)	C		Descriptio			Fee Paid	
Account Number	502731		1051	130	2051		_		filing fee or		r cover		
Deposit Account Alexza Mol	ecular Deli	very Corn	1052	50	2052	25	sheet		provisional	miny iee Oi	Ovei	<u></u>	
Name Alexza WIUI	Dell	very corp.	1053		1053			- English sp	_				
The Director is authorized to:	(check all that	apply)		2,520					est for <i>ex pa</i>	_	_		
Charge fee(s) indicated below	_	ny overpayments	1804	920*	1804	920*	Requ action		lication of SI	K pnor to E	=xaminer	L	
Charge any additonal fee(s) dur			1805	1,840*	1805	1,840*	Requ		lication of SI	R after Exa	aminer		
Charge fee(s) indicated below, on the above-identified deposit according to the control of the c		ing fee	1251	110	2251	55			sion for reply within first month				
			1252		2252	205	Exter	nsion for re	on for reply within second month				
1. BASIC FILING FEE	CULATION		1253	930	2253	465	Exter	nsion for re	on for reply within third month				
arge Entity Small Entity			1254	1,450	2254	725	Exter	nsion for re	ply within fo	urth month			
Fee Fee Fee Fee Fee	e Description	Fee Paid	1255	1,970	2255	985	Exter	nsion for re	ply within fift	h month			
Code (\$) Code (\$) 1001 750 2001 375 Utili	ity filing fee	Teeraid	1401	320	2401	160	Notic	e of Appea	d				
	sign filing		1402	320	2402	160	Filing	g a brief in s	support of ar	n appeal			
	nt filing fee		1403	280	2403	140	Requ	uest for oral	hearing				
	ssue filing		1451	1,510	1451	1,510	Petiti	ion to institu	ute a public i	use procee	ding		
1005 160 2005 80 Pro	visional filing fe	ee	1452	110	2452	55	Petiti	ion to revive	e - unavoida	ble			
SUBTO	OTAL (1)	(\$)	1453	1,300	2453	650	Petiti	ion to revive	e - unintentio	onal			
2. EXTRA CLAIM FEES			1501	1,300	2501				(or reissue)				
	Fee	e from	1502		2502			gn issue fe	е				
Extra Claim Total Claims	s b	elow Fee Paid = 0.00	1503		2503			t issue fee				L	
Independent 3**=	₩ â	= 0.00	1460		1460	130			Commission				
Claims Multiple Dependent		=	1807	50	1807			_	under 37 CF	-	(q)		
arge Entity Small Entity			1806	180	1806	180		mission of li ement	nformation D	visclosure			
Fee Fee Fee Code (\$)	Fee Descri	ption	8021	40	8021	40			patent assignment		rproperty	40.00	
	aims in excess	of 20	1809	750	2809	375	Filing	g a submiss	sion after fina	•			
1201 84 2201 42 Ind	lependent clain	ns in excess of 3			· /		(37 C	CFR § 1.12		·			
	•	nt claim, if not paid	1810		2810		(37 C	CFR § 1.12	29(b))				
	Reissue indepe over original pat		1801		2801				ntinued Exar		CE)		
		in excess of 20	1802	900	1802	900	Requ of a c	uest for exp design appl	edited exam lication	ination			
	ind over origina		Oth	er fee (specify								
SUBTO	TAL (2)	(\$) \$0.00											
or number previously paid, if o	_	· · · · · · · · · · · · · · · · · · ·	*Re	duced b	y Basic	Filing	Fee P	Paid	SUBTO	TAL (3)	(\$)	\$40.00	
SUBMITTED BY									Complete (i	f applicable)	7 27		
Name (Print/Type)	Elaine C. Strack	er J.D., Ph.D.		Registration No. (Attorney/Agent) 43,166		,166	Telephone	hone (650) 687-3905					
Signature			/						ember 20,	2003			
	Im (